

LANCASHIRE AND CHESHIRE BRANCH OF THE
BRITISH MEDICAL ASSOCIATION.

PRESIDENTIAL ADDRESS
ON
OVERCROWDING IN THE MEDICAL PROFESSION,
AND ITS REMEDY.

BY

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PRESIDENTIAL ADDRESS.

LADIES AND GENTLEMEN,—In the first place, let me thank you for the very high honour you have conferred upon me by electing me your President for the ensuing year. I feel this distinction all the more because I am conscious that I have not deserved it by any work that I have done for the Lancashire and Cheshire Branch. I may be pardoned for this, however, when I say that the interests of this University College in which we are now assembled, and those of the adjacent Royal Infirmary, together with the business of the General Medical Council and the Council of the College of Surgeons, have absorbed all the time that I could reasonably spare from the ordinary business of life. If, however, health and strength are granted me during the next twelve months, I hope to do something to atone to you for my apparent lack of interest in the work of the Branch in bygone years.

At many meetings held during the past year, I could not help being painfully struck with the often repeated mention of the very small fees which, in certain of its departments,—notably that of midwifery,—many members of our profession were forced to accept. It is not that there is anything dishonourable in accepting a small fee. Why, the very smallest fee honourably earned from and gratefully paid by the poorest working-man is a king's ransom, in moral value, compared with the great sums extorted by that prince of quacks, the fashionable London specialist. But what one could not help feeling was, that the physical labour, the mental fatigue, and the harassment and anxiety expended by many of our brethren upon their cases were utterly disproportionate to the value of the fees supposed to remunerate them. Can it be that the mercantile price of

medical skill is depreciating in money value? This is not possible. The article, if one may so term it, is of far better quality than ever it was as regards intrinsic worth. Is it the general bad times? No doubt this accounts for a good deal, but the difficulty of making a living in medicine has been steadily getting greater in the large cities and in the manufacturing districts for the last twenty-five years. Are we, as a body, falling in the estimation of the public, who are ceasing to respect us and who think our skill no longer worth paying for? Quite the contrary. As an honourable profession Medicine never took so high a rank in all its history as it does to-day. What, then, is the cause of this bitter cry from many of the rank and file of our profession, that they can only make their bread by miserable fees, earned by intolerably hard work? Gentlemen, it requires no royal commission to find this out. The simple fact is that, with us as with many other businesses and trades, there are too many of us for it. That is the sum and substance of the whole thing.

Many circumstances have contributed to this overcrowding. In former days a man of good family and social rank, but whose fortune was not very great while his children were numerous, could often find places for a son or two in the Church or in the Army, through the influence of powerful friends. But the days of interest are gone, and these avenues are closed now. As for the Bar, the numbers of the bricflless seem ever on the increase, while legal proceedings are actually diminishing in number. In business the quiet old trading days are done, and there is nothing but hurry and conflict and cheating and risk. So that the merchant sees in Medicine a comfortable sphere of life, where a living can usually be made by any sober and industrious man. Thus the great Medical Schools have been pouring out a deluge of young practitioners, which has overwhelmed the land. One remembers the story of Abernethy's celebrated address to an audience of new-fledged doctors, which began with, "Good heavens! gentlemen, what is to become of you all?" It is a good thing for him that he did not live to see the present state of things. It is curious to note, moreover, how we doctors are unknowingly compelled to follow the stream of popular prejudice.

At the present day the desire is for life in towns where there is activity and energy and rivalry and companionship. A quiet life in the country is not in accord with the temper of the times, and men fly to the haunts of men.

I confess that there is no profession which has such a good excuse for so doing as ours. To make the spark, steel must rub against steel; in order to progress, brain must struggle against brain. But, as a result, the overcrowding of our towns has only become all the more marked. There used to be many quiet old villages in England, where the doctors succeeded each other from father to son for three and four generations, and where the inhabitants did not believe there could be any doctors worth talking about except those who had supported their fathers' and mothers' heads as they lay a-dying, and who had brought *them* into the world. But these days are gone; and our business is not to lament the past, but to do the best for the present.

Being, then, face to face with the fact that there are so many doctors in our cities and manufacturing towns, that a man must live a life of incessant labour and turmoil even to exist, and that in many cases he cannot even do that,—What is the disadvantage to the public in this? For it is right to take note of them as well as of ourselves. I have heard it argued by business men, that there cannot be any harm in this, seeing that competition has compelled men to exercise every mental gift they possess, so as to excel each other in manufacturing things at a cheap rate, by which means the public have been great gainers. This, I admit, is perfectly true, but, as it happens, there is an immeasurable gulf fixed between the capacity of the ordinary man or woman to judge of the value of articles of commerce, and their capacity to judge of the value of medical skill. Every man who has long taught students becomes sententious: he invents proverbs. I have long ago invented one to the effect that in Religion and Medicine the public like being quacked; they deliberately prefer it. Just look round the circle of your acquaintances. They understand a business bargain. You can't take them in over buying a house or a piece of land. They appreciate to a penny the wares of the greengrocer or the

milliner. But you have only to take a bread pill and "bill" the intervening space from the pyramids of Egypt to the cañons of the Rocky Mountains with posters, which announce that it will cure every disease from chicken-pox to cancer, and you will make a huge fortune, which you will no doubt bequeath to charities when you die, as a kind of *quid pro quo* for having robbed your fellow-men during a long lifetime. A man comes to consult you, whose ailment is clearly due solely to his manner of living. You give him honest advice about this, show him how he must alter his habits, and tell him he doesn't require physic. He has no sooner got on to your doorstep than he proclaims you a fool, and proceeds to dose himself with Elliman's Little Kidney Pills, or Beecham's Embrocation, or Siegel's Gore Mixture. Both in his religion and in his medicine the average man doesn't want to hear common-sense: he wants to have something that will cure his soul or his body at once, by some supernatural means; and if you can lie hardily enough to him, he will swallow any dogma or any pill you like to stuff down his throat,—and pay handsomely for it, too. I cannot be accused of exaggerating, when one considers the vast numbers of persons who have voluntarily paid for Harness' Electric Belts and Count Mattei's Cure for Cancer. But the result of all this to us, as a profession, is very serious, for it is a direct inducement to us to prey upon the credulity of our patients, and I do not believe there is another body of men to be found anywhere which makes such strenuous efforts to be honest as we do, in spite of very great temptations to the contrary. If any man among us chooses to cut himself clean adrift from the society of his honest brethren, and to set up as an out-and-out daring charlatan, he is at any rate sure of making plenty of money, if only he will take for his motto, *L'audace, toujours l'audace*. Let us pursue the argument a stage further. Let us suppose a condition where, owing to there being more men than there is work for them to do, a certain number see no prospect of earning a decent living before them. What are they to do? It was all very well for Monsieur Talleyrand to tell the poor devil who said that he had to live, that he saw no necessity for it. The poor devils insist on living in spite of Monsieur

Talleyrand; and if they cannot live honestly—well, then, they will live the other way. Go down any big street in the north end of Liverpool, and before you have gone far you will come upon a shabby-looking shop, which has evidently remained empty for a long time till occupied by the present tenants. The window is blackened, but its dulness is relieved by gold letters which inform you this is a Dispensary: that Dr Dosem, Physician, Surgeon, and Accoucheur is in attendance from 9 a.m. to 9 p.m.: that medicine and advice are given for the moderate sum of sixpence, or even threepence, and that vaccination is performed at a phenomenally low figure. If you come back in a month or two you will find that the Dispensary has been let to a greengrocer, but Dr Dosem has transferred his large and lucrative practice to another shop in a back slum of Manchester. Many of you are medical officers to clubs, and have been waited upon by the representatives of these clubs to know what is the very lowest figure at which you will take them. In the course of a week you learn that a neighbouring practitioner, two streets off, has been entertaining these gentlemen to pipes and whisky-and-water in his best sitting-room, and that he has agreed to take them at sixpence a head less than you had announced as your minimum. Others of you, having gathered around you a comfortable practice, can remember how a practitioner from a neighbouring village planted in a house close to you one of those wretched Helots of medicine, known as unqualified assistants, to whom he acted as “cover,” while his slave sweated for him in the pleasant task of undermining your practice by underselling you. Thank God! the Medical Council has pretty well succeeded in stamping out such proceedings, well stigmatised by them “infamous” from a professional point of view. And still there is a lower depth; for in every big city you will find qualified men sitting in shops of, and openly abetting, those pests of society, the dealers in mysterious remedies for venereal diseases, whose advertisements, with singular appropriateness, adorn the walls of the public urinals.

If you ask, Gentlemen, how these miserable things can be done by educated gentlemen, the members of a liberal

profession, I reply that these are not *educated gentlemen*. They are men who should never have been in the ranks of our profession at all. They are, I admit, sorely tempted. Mostly they have wives and children depending on them, and clamouring for bread. Practice does not seem to come their way, and still the butcher and the baker must be paid; and so they naturally say to themselves,—If we cannot live honestly, we must live as best we can. I am charitable enough to believe that this is the case in the majority of instances, but there are not a few men who have simply the instincts of small shop-keepers. Their point of view of practice is identical with the point of view of a small grocer or third-rate chemist as regards his “takings.” They adopt, positively by choice, the mean and sordid part of their profession. One of these men frankly told me, some years ago, that he did not care a fig for his profession, nor for the respect of his professional brethren. He wanted to get hold of money, and money he would have, however he got it.

I need not dwell further upon this very painful side of professional life. You are all too well acquainted with it. How is it to be remedied? In conversing with my brethren in general practice, I have often seen them get into a state of very righteous indignation about the matter; but when asked what they would do, they have talked vaguely about the law being called in to put an end to such degrading practices as I have alluded to, or have vituperated against the General Medical Council for not putting down with a firm hand all the quacks and rascals in the profession. Such talk is weak in the extreme. The law will never do anything for us. Lawyers have always banded themselves together to resist any improvements in their own profession, and they have no sympathy with us in our efforts to purge ours of its impurities. Nay, they sympathise really with the mass of the public, who, as I have just said, are congenital lovers of quackery in Religion and Medicine. I remember, years ago, a foul monster in Liverpool, who imposed upon the poor of a certain district. Apart from his doings as a charlatan, he was a man of notoriously filthy life, and this was known to all. For a certain improper act, which

ended in the death of a woman, he put his neck within the noose of the law. His counsel at the trial represented him as a man specially gifted by the Almighty with a faculty of healing, who was being persecuted by a parcel of narrow-minded, ignorant doctors, who wanted to repress true genius of every kind. The judge said nothing against him, the jury acquitted him, and the public in court cheered the verdict; and yet, if ever a man was guilty, that blackguard was. A short time afterwards, this man, to whom God had granted His special favour to enable him to cure his fellow-men of their diseases, killed himself by poison, in a drunken frenzy. No! Gentlemen, you need never expect anything from the law, for neither counsel, judge, nor jury sympathise with you.

The cry, too, about the General Medical Council putting down all the rascals in and out of our profession, is more foolish still. Why, they would need to sit all the year round, and then they would not do it! The other day they tried a certain man. They could not legally convict him, and he was discharged. But that one trial cost the profession £600. I think that during the past ten years the Council has done its utmost to put down such offenders as they could summarily and effectually deal with. Another remedy has been suggested: Why not increase the severity of the professional examinations? Well, this is a matter with which I may claim to be fairly well acquainted, seeing that during the last ten years I have been intimately mixed up with all the legislation that has emanated either from the General Medical Council or from the College of Surgeons. I can confidently affirm that it is not possible at present to add to the burden of examinations which the medical student has to bear, without doing more harm than good. The best thing that could occur would be a total cessation of legislation upon this subject for the next five years. You can go on, no doubt, adding subject to subject, and examination to examination, but by so doing you only drive the student into further and further cramming. His serious defect at present is that, owing to the eternal cramming to which he is compelled to have recourse in order to master his subjects, he

loses all power of thinking or reasoning for himself. He is being reduced to a mere grinding-machine, which has to be constantly stoked up with scientific pabulum. And if you increase the number of subjects and examinations, you will only send out machine-made men in place of hand-made ones; and who is there that cannot tell the difference in style, in vigour, and in durability which the work of the hand, which shows the workman's soul, has over the work of the inanimate machine? Enough has been effected in that direction. The finest thing that has been done for the profession for many a long year was the enforcement of the five years' curriculum, and its effect in diminishing the numbers at some of the gigantic doctor factories has already been quite pronounced.

Well, then, you ask what is my remedy. My remedy consists simply in stiffening up the entrance examinations. I hold that there ought to be a rough sieve supplied at the very beginning, and that all who cannot get through this sieve should be cast on one side. As things stand at present, any man who gets through an entrance examination will ultimately get a qualification of some kind, which will enable him to put "Doctor" on his doorplate, with just as much effect as a graduate in honours of the London University. You cannot hinder him from this by any amount of scientific or professional examinations. He will rub through these bit by bit. Any teacher of experience will tell you how futile it is to attempt to turn back a man who has once passed an entrance examination, if that man is determined to go on. Besides, it seems to me unfair to allow an inferior man to enter upon a course of professional studies for which he is obviously unfitted. He ought not to be allowed to get so far. He should be turned back at the very commencement, and not encouraged to throw away years on unavailing work. It has been said that if only those who have had a really good preliminary education are to be allowed to enter the profession, you may keep back many poor but struggling geniuses, who might afterwards make great names for themselves. Well, there would be reason in this argument if we were in want of men to join our ranks; but when our

object is to keep out applicants, the persons to be kept out are the badly-educated, under-bred ones. They will be far happier as decent tradesmen, in positions where their manners and their ways of thinking will not be out of place. When admitted among us, they simply hold us down; and the few heaven-born geniuses among them would never be missed.

I have heard an argument raised by old-fashioned educationalists, viz., that there ought to be two orders of medical men,—a set of poorly-educated, common ones, who should doctor the poor; and a set of highly-educated, well-bred ones, who should doctor the rich. It will occur to everyone who knows anything of the past, that this is simply a reversion to the bad old days of the apothecary and the physician,—an arrangement which, more than anything else, contributed to prevent our profession in England for many generations from obtaining that proper position in society to which it was entitled. I consider this a cruel and shocking doctrine. By admitting it you would bring into the profession a set of men who were to be its Pariah dogs:—whose lives were to be spent in back slums among the poor, living upon what may be termed medical garbage, and going on from one weary year to another without hope of amendment. I would have all men start fair in point of education. Let the beginners begin with the poor if you will; their ambition will soon enable them to climb over the backs of their needy patients into the pockets of the rich.

I have said that I consider the subjects of a medical education and the examinations therein to be amply sufficient if they are only properly kept up to the mark by due inspection. But I do not admit this with regard to the entrance examinations. These vary in the most remarkable manner, both as to subjects and as to the severity of examinations. I have not been teaching students for nearly thirty years without knowing what I am talking about, and I say that there are in the profession at this minute an enormous number of men whose general education is of the lowest type, and who never could have got into it if the entrance examinations had been of a proper standard. Ask any examiner of experience what he thinks of the English of the

papers he has to read, and he will tell you that it is often lamentable—spelling, punctuation, and composition being simply set at naught. As I write this, I have before me a paper in Elementary Anatomy, written in a miserable handwriting and with hardly any punctuation. On looking over the first three pages thereof I noticed the following spellings, each one of which occurred oftener than once :—

Olfactory,	spelt	Olphactory.
Ophthalmic,	„	Ophthalmic.
Foramen,	„	Foramine.
Deseending,	„	Dessending.
Groove,	„	Grove.
Fascia,	„	Fassia.
Trapezius,	„	Trapesius.
Obliquus,	„	Obliquous.
Separated,	„	Sepperated.
Longitudinal,	„	Longtitudinal.
Ridge,	„	Rige.

Now, the gentleman who wrote this must have passed an entrance examination about eighteen months previously. What sort of an examination must it have been ?

Again, some six years ago the Seeretary for War sent a letter to the General Medical Councail, complaining of the want of knowledge of their own language shown by eandidates for places in the Army Medieal Service. I heard this letter read, and I never felt so ashamed of my profession in my life. It seemed to me a most ignominious thing for us that even soldiers should point the finger of scorn at us in the matters of general education.

It is true that the General Medieal Councail ordains that certain subjects must form part of every entrance examination paper. But the examinations are conducted by one educational body in England, by another in Ireland, and by another in Scotland, while many lieensing bodies are allowed to conduct their own examinations. I fear that the members of that

Council have no accurate idea of the real value of these entrance examinations as tests. You can draw up a paper of questions, apparently of the most appalling severity,—indeed, this is the usual practice. But the real point is, What sort of answers do you take? I unhesitatingly affirm that no man who has had much to do with examination papers will tell you that it is possible that the candidates who have passed many entrance examinations can have come anywhere near the standard which is ostentatiously displayed by many licensing bodies. For some years past the Medical Council has done an immense service to education by the inspection of the examinations in Midwifery, Medicine, and Surgery. Only last month they publicly announced the inefficiency of the examinations of a certain conjoint board, and threatened it with extinction unless matters were immediately improved. The only remedy that I can see for the present melancholy inefficiency of our present entrance examinations is, that the Council shall take these into their own hands, and properly supervise them. They ought to be uniform all over the country; and they ought to be conducted by independent men, who shall have no interest in schools or licensing bodies whatever. Moreover, they ought to be inspected like the other examinations to which I have just alluded. The immediate result would be the sifting out of those men of inferior stamp, who do us, as a profession, much harm. When the proportion of medical men to the population is such that a doctor in general practice can be sure of making a respectable living, the temptation to the perpetration of mean practices will disappear, and the General Medical Council will soon find its duty as a criminal court disappear also.

This, then, is in my opinion the real remedy for the present evils of our profession. I do sincerely hope that the subject will soon attract the attention of our great Association. There is nothing, I am sure, of such vital importance to us as a body. When once a man has passed through the portal of an entrance examination, you can practically do nothing to him. It is at that portal that he should be stopped, and directed to some other path in life.

Finally, Gentlemen, if we are to effect this, or indeed any marked improvements in our profession, we shall have need of a great deal more cohesion than we have hitherto shown. Whenever we have attempted anything of this sort, the public immediately call us a "trade union," and every newspaper emphasises the name. Well, if they do this, we may as well deserve the name. Let us struggle to be more and more of a trade union,—to fight against the tyranny of what I am almost tempted to call our common enemy, the public. Show me a greater trade union than the Bar! Why, a barrister in a good position won't look at his client, who pays him his fees. He will take cases in two Courts, and attend only one of them, pocketing the fees all the same. Just fancy any one of you being paid in advance for your midwifery cases, and attending just so many as you conveniently could. Would there not be a howl of indignation against you in any court of justice to which you were haled for the purposes of disgorging money paid for work which you had not done? And yet, wealth, titles, positions of enormous dignity and power, and honours of all sorts, are showered upon barristers, and the public fall down and worship them. So much for having what the Paisley weaver called "a guid conceit o' himsel'." But as for us, vestries and boards of guardians screw us down to the last penny, while corporations and county councils remunerate the services of a Medical Officer of Health as they would those of a cabman. If an accident occurs on the streets, the nearest doctor must fly to it if he would not hear himself denounced as a monster of inhumanity by some pettifogging coroner, glorifying himself before a jury of cobblers. Suppose that coroner and jury were asked to pay the doctor's fee in order to show their sympathy with the deceased and his family, I wonder what they would say?

The conclusion of the whole matter is, that, first of all, we must diminish our numbers by keeping out unworthy applicants; and secondly, we must close up our ranks, and form in every town Medical Societies, who shall blackball every member who does mean things, and who shall coerce the

public and public bodies into appreciating our services at a proper value.

Gentlemen, I hope the coming year will be one of profit and pleasure to us. We may have important subjects to debate. If so, let me hope we shall all do so in a dignified manner, each man imputing to his opponent nought that is unworthy, and giving him credit, at least, for honest intentions. As for me, I will endeavour to serve the Branch by being (whatever else may be my shortcomings) at least a fair and impartial President.

